

MAR 2 9. 2018

PTO/SB/97 (07-09)
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R. Scott Kimsey

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50195

573.864.5223

Registration Number, if applicable

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6. Fee Transmittal

## Included:

- 1. Amendment and Response
- 2. Declaration of Robert C. Leif
- 3. Request for Continued Examination
- 4. Request for Extension of Time
- 5. Transmittal Form

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Doc Code: TRAN.LET

Document Description: Transmittal Letter

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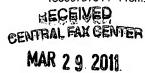
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TRANSMITTAL FORM  Filing Date June 12, 2006 Filing Date June 12, 2006 Filing Date June 12, 2006 Filing Date Art Unit Bern Art Unit Bern Art Unit Bern Melissa Jean Perreira  After Allowance Communication to TC Appeal Allowance Communication to TC Appeal Communication to TC Appeal Allowance Communication to TC Appeal Regulary Information Date of Correspondence Address Terminal Disclaimer Device of Altonew, Revocation Change of Correspondence Address Terminal Disclaimer Devector of Altonew, Revocation Change of Correspondence Address Terminal Disclaimer Devector of Altonew, Revocation Change of Correspondence Address Terminal Disclaimer Devector of Altonew, Revocation Change of Correspondence Address Terminal Disclaimer Devector of Altonew, Revocation Change of Correspondence Address Terminal Disclaimer Devector of Altonew, Revocation Change of Correspondence Address Terminal Disclaimer Devector of Altonew, Revocation Change of Correspondence Address Terminal Disclaimer Devector of Appeal Communication to TC Appeal Regulary Information Status Letter Devector of Appeal Regulary Information Status Letter Devector of Appeal Regulary Information Status Letter Devector of Appeal Regulary Information Request for Continued Examination Request for Regulary Information Request for Continued Examination Request for Continued Examination Request for Continued Examination Request f	UINE	THE PROFIMORY	CUGULOT FILED: 1939	. IIV beliaviis	100	died to respond to a	WILL WORLD OF IT	Connection	MIIIC33 II	DISPLAYS & TENIO CHILD CANNO	Humper.			
FIRST Named Inventor Robert C. Leif And Unit 997  Total Number of Pages in This Submission 27  ENCLOSURES (Check all that apply)  ENCLOSURES (Check all that apply)  ENCLOSURES (Check all that apply)  Fee Transmittal Form						Application Number 10/578,355					, .e. \			
Art Unit agrit    And Unit   Septiment   State   State		TRANS	MITTAL				June 12,	June 12, 2006						
Examiner Name    Examiner Name   Melasa Jean Perreira		FO	RM				Robert C	Robert C. Leif						
Total Number of Pages in This Submission   27					Art U	nit	8971	8971						
Total Number of Pages in This Submission   27	to be used for all correspondence after initial fillings					niner Name	Melissa J	elissa Jean Perreira						
ENCLOSURES (Check all that apply)    Fee Transmittal Form					Atton	ney Dockel Number								
Fee Transmittal Form    Drawing(s)														
Fee Transmittal Form    Fee Attached	,,,,,,													
Amendment/Reply Amendment/Reply Amendment/Reply Atter Final Affidavits/declaration(s) Extension of Time Request Express Abandonment Request Information Disclosure Statement CD, Number of CD(s) Landscape Table on CD  Remarks  SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT  Signature  Printed name R. Scott Kimsey Date  March 29, 2011  Reg. No. 50195  CERTIFICATE OF TRANSMISSION/MAILING  I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below:  Signature  Date  Date  Appeal Communication to TC (Appeal Notice, Brite, Reply Briter) Proprietary Information Status Letter Other Enclosure(s) (please Identify below): Request for Continued Examination  Status Letter Other Enclosure(s) (please Identify below): Request for Continued Examination  Status Letter Other Enclosure(s) (please Identify below): Request for Continued Examination  Status Letter Other Enclosure(s) (please Identify below): Request for Continued Examination  Status Letter Other Enclosure(s) (please Identify below): Request for Continued Examination  Status Letter Other Enclosure(s) (please Identify below): Request for Continued Examination  Request for Continued Exa		Fee Attached  Amendment/Reply  After Final  Affidavits/declaration(s)  Extension of Time Request			Licensing-related Papers  Petition Petition to Convert to a Provisional Application Power of Attorney, Revocation Change of Correspondence Address Terminal Disclaimer				Appeal Communication to Board					
Landscape Table on CD  Certified Copy of Priority Document(s)  Reply to Missing Parts/ Incomplete Application Reply to Missing Parts/ under 37 CFR 1.52 or 1.53  SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT  Firm Name  Signature  Printed name R. Scott Kimsey  Date  March 29, 2011  Reg. No. 50195  CERTIFICATE OF TRANSMISSION/MAILING  I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents. P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below:  Signature									Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)  Proprietary Information  Status Letter Other Enclosure(s) (please Identify below):					
Landscape Table on CD  Certified Copy of Priority Document(s)  Reply to Missing Parts/ Incomplete Application Reply to Missing Parts/ under 37 CFR 1.52 or 1.53  SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT  Firm Name  Signature  Printed name R. Scott Kimsey  Date  March 29, 2011  Reg. No. 50195  CERTIFICATE OF TRANSMISSION/MAILING  I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents. P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below:  Signature				$  \Box  $	CD, Number of CD(s)									
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Signature  Printed name  R. Scott Kimsey  Date  March 29, 2011  Reg. No. 50195  CERTIFICATE OF TRANSMISSION/MAILING  I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below:  Signature	SIGNATURE OF ARRIVANT ATTORNEY OR ACENT													
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Data 14-11-20 2044	sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below:													
Typed or printed name R. Scott Kimsey Date March 29, 2011	Signature													
	Typed or printed name R. Scott Kimsey									March 29, 2011				

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## MAR 2 9 2018.

PTO/SB/17 (10-08)

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Effective on 12/08/2004.	2005 (11 (2) 4040)	Complete If Known									
Fees pursuant to the Consolidated Appropriations Act,		Application Number	10/578,35	55							
FEE TRANSMI	IIAL	Filing Date	June 12, 2								
For FY 2009		First Named Inventor	Robert C.	. Leif							
	2 OFD 4 07	Examiner Name Melissa		Jean Perreira							
Applicant claims small entity status. See 37	CFR 1.27	Art Unit	8974 16	18							
TOTAL AMOUNT OF PAYMENT (\$)		Attorney Docket No.									
METHOD OF PAYMENT (check all that apply)											
Check ✓ Credit Card Money Order None Other (please identify):											
Deposit Account Deposit Account Number: Deposit Account Name:											
For the above-identified deposit account,	the Director is her	reby authorized to: (check	call that app	oly)							
Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee											
Charge any additional fee(s) or underpayments of fee(s) Credit any overpayments under 37 CFR 1.16 and 1.17 WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.											
FEE CALCULATION											
1. BASIC FILING, SEARCH, AND EXAMINATION FEES  FILING FEES SEARCH FEES EXAMINATION FEES  Small Entity Application Type Fee (\$)											
Application Type Fee (\$) Fee (\$) Utility 330 165	540	270 Fee (\$) Fee									
Design 220 110		50 14									
Plant 220 110	•	165 17	·								
Reissue 330 165	540	270 65									
Provisional 220 110	0		-	0							
2. EXCESS CLAIM FEES Fee Description Each claim over 20 (including Reissues) Each independent claim over 3 (including Reissues)  Each independent claim over 3 (including Reissues)  Small Entity Fee (\$) 26 210											
Multiple dependent claims  Total Claims Extra Claims	F== (#)	e Paid (\$)		390 195 ultiple Dependent Clair	I						
<u>Total Claims</u> <u>Extra Claims</u> 20 or HP = x	Fee (\$) Fee	B Pald (\$)	_	Fee (\$) Fee Paid (\$)							
HP = highest number of total dalms paid for, if great Indep. Claims Extra Claims		Paid (\$)			_						
-3 or HP = x =											
HP = highest number of independent claims paid for, if greater than 3.  3. APPLICATION SIZE FEE  If the president and drawings avecad 100 sheets of purpor (evel) dies electronically filed sequence or computer.											
If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$270 (\$135 for small entity) for each additional 50											
sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).  Total Sheets  Extra Sheets  Number of each additional 50 or fraction thereof  foor a display of the sheets    Fee (\$)   Fee Paid (\$)											
4. OTHER FEE(S)  Non-English Specification, \$130 fee (no small entity discount)											
Other (e.g., late filing surcharge): Reque	,	•	nsion of Tim	ne (\$555)	\$960						
Submitted by Signature		Registration No. 50195		Telephone 573.864.522	23						
Name (Print/Type) R. Scott Kimsey	J.	(Attorney/Agent) 50195		Date March 29, 2011							
[Hame (Frink) ype][R. Scott Kimsey			•	5516 Mai G1 23, 2011							

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